

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT ▼ Example: If typing, type over the lines. 12FE4M5

AX PAC

ADDRESS (number and street) PO Box 538
 Check if different than previously reported. (ACC) Wausau WI 54402

2. FEC IDENTIFICATION NUMBER ▼ CITY ▲ STATE ▲ ZIP CODE ▲

C C00506535 3. IS THIS REPORT NEW (N) OR AMENDED (A)

4. TYPE OF REPORT (Choose One)
(a) Quarterly Reports:
 April 15 Quarterly Report (Q1)
 July 15 Quarterly Report (Q2)
 October 15 Quarterly Report (Q3)
 January 31 Year-End Report (YE)
 July 31 Mid-Year Report (Non-election Year Only) (MY)
 Termination Report (TER)
(b) Monthly Report Due On:
 Feb 20 (M2) May 20 (M5) Aug 20 (M8) Nov 20 (M11) (Non-Election Year Only)
 Mar 20 (M3) Jun 20 (M6) Sep 20 (M9) Dec 20 (M12) (Non-Election Year Only)
 Apr 20 (M4) Jul 20 (M7) Oct 20 (M10) Jan 31 (YE)
(c) 12-Day PRE-Election Report for the: Primary (12P) General (12G) Runoff (12R)
 Convention (12C) Special (12S)
Election on M M / D D / Y Y Y Y Y Y in the State of
(d) 30-Day POST-Election Report for the: General (30G) Runoff (30R) Special (30S)
Election on M M / D D / Y Y Y Y Y Y in the State of

5. Covering Period M M / D D / Y Y Y Y Y Y 04 / 01 / 2018 through M M / D D / Y Y Y Y Y Y 04 / 30 / 2018

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.
Reisner, Michele, , ,
Type or Print Name of Treasurer

Signature of Treasurer Reisner, Michele, , , [Electronically Filed] Date M M / D D / Y Y Y Y Y Y 05 / 20 / 2018

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 52 U.S.C. § 30109.

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 05/2016)

Page 2

Write or Type Committee Name

AX PAC

Report Covering the Period: From: / / To: / /

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <input type="text" value="2018"/>		73397.06
(b) Cash on Hand at Beginning of Reporting Period.....	20028.46	
(c) Total Receipts (from Line 19)	17500.00	38603.75
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	37528.46	112000.81
7. Total Disbursements (from Line 31).....	23496.15	97968.50
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	14032.31	14032.31
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	

This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

For further information contact:

Federal Election Commission
999 E Street, NW
Washington, DC 20463

Toll Free 800-424-9530
Local 202-694-1100

DETAILED SUMMARY PAGE
of Receipts

Write or Type Committee Name

AX PAC

Report Covering the Period: From: / / To: / /

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other		
Than Political Committees		
(i) Itemized (use Schedule A).....	0.00	5000.00
(ii) Unitemized	0.00	0.00
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	0.00	5000.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	17500.00	31500.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5)	17500.00	36500.00
12. Transfers From Affiliated/Other Party Committees.....	0.00	2103.75
13. All Loans Received	0.00	0.00
14. Loan Repayments Received.....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....	0.00	0.00
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3).....	0.00	0.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfers (add 18(a) and 18(b))..	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)).....▶	17500.00	38603.75
20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶	17500.00	38603.75

DETAILED SUMMARY PAGE
of Disbursements

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures	23496.15	61468.50
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	23496.15	61468.50
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	36500.00
24. Independent Expenditures (use Schedule E)	0.00	0.00
25. Coordinated Party Expenditures (52 U.S.C. § 30116(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	0.00
29. Other Disbursements (Including Non-Federal Donations).....	0.00	0.00
30. Federal Election Activity (52 U.S.C. § 30101(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	23496.15	97968.50
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	23496.15	97968.50

DETAILED SUMMARY PAGE
of Disbursements

III. Net Contributions/ Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3)	17500.00	36500.00
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	17500.00	36500.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	23496.15	61468.50
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	23496.15	61468.50

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 6 OF 13
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
AX PAC

A. AMERICAN EXPRESS PAC
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 801 PENNSYLVANIA AVENUE NW
SUITE 650
City WASHINGTON State DC Zip Code 20004-2673
FEC ID number of contributing federal political committee. **C** C00040535
Name of Employer (for Individual) Occupation (for Individual)
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 04 / 13 / 2018
Transaction ID : SA11C.59967
Amount of Each Receipt this Period 2500.00
 Memo Item
CONTRIBUTION

B. AMERICAN EXPRESS PAC
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 801 PENNSYLVANIA AVENUE NW
SUITE 650
City WASHINGTON State DC Zip Code 20004-2673
FEC ID number of contributing federal political committee. **C** C00040535
Name of Employer (for Individual) Occupation (for Individual)
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 04 / 13 / 2018
Transaction ID : SA11C.59968
Amount of Each Receipt this Period 2500.00
 Memo Item
CONTRIBUTION

C. AMGEN PAC
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 1 AMGEN CENTER DRIVE
City THOUSAND OAKS State CA Zip Code 91320-1730
FEC ID number of contributing federal political committee. **C** C00251876
Name of Employer (for Individual) Occupation (for Individual)
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date ▼ 2500.00

Date of Receipt 04 / 13 / 2018
Transaction ID : SA11C.59970
Amount of Each Receipt this Period 2500.00
 Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 7500.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 7 OF 13
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
AX PAC

A. DELTA AIR LINES POLITICAL ACTION COMMITTEE

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 1212 NEW YORK AVENUE NW
SUITE 200

City WASHINGTON State DC Zip Code 20005-6609

FEC ID number of contributing federal political committee. **C** C00104802

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2500.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
04 / 13 / 2018

Transaction ID : SA11C.59972

Amount of Each Receipt this Period
2500.00

Memo Item
CONTRIBUTION

B. ERNST & YOUNG POLITICAL ACTION COMMITTEE

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 1101 NEW YORK AVE NW

City WASHINGTON State DC Zip Code 20005-4269

FEC ID number of contributing federal political committee. **C** C00227744

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
04 / 13 / 2018

Transaction ID : SA11C.59971

Amount of Each Receipt this Period
5000.00

Memo Item
CONTRIBUTION

C. INDEPENDENT INSURANCE AGENTS & BROKERS OF AMERICA PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 20 F STREET, NW SUITE 610
SUITE 300

City WASHINGTON State DC Zip Code 20001-6707

FEC ID number of contributing federal political committee. **C** C00022343

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
2500.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
04 / 13 / 2018

Transaction ID : SA11C.59969

Amount of Each Receipt this Period
2500.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	10000.00
TOTAL This Period (last page this line number only).....	17500.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
AX PAC

Full Name (Last, First, Middle Initial) A. CMDI, INC.		Date of Disbursement MM / DD / YYYY 04 / 17 / 2018
Mailing Address 1593 SPRING HILL ROAD SUITE 400		FEC Identification Number C Transaction ID : SB21B.I9840 Amount of Each Disbursement this Period 250.00
City VIENNA	State VA Zip Code 22182-2245	
Purpose of Disbursement DATABASE SERVICES		Memo Item <input type="checkbox"/>
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) B. MEACHUM, PETE, , ,		Date of Disbursement MM / DD / YYYY 04 / 18 / 2018
Mailing Address 432 NEW JERSEY AVE SE UNIT 3-14		FEC Identification Number C Transaction ID : SB21B.I9841 Amount of Each Disbursement this Period 481.59
City WASHINGTON	State DC Zip Code 20003-5403	
Purpose of Disbursement TRAVEL		Memo Item <input type="checkbox"/>
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) C. AMERICAN AIRLINES		Date of Disbursement MM / DD / YYYY 04 / 18 / 2018
Mailing Address 4333 AMON CARTER BLVD		FEC Identification Number C Transaction ID : SB21B.I9856 Amount of Each Disbursement this Period 481.59
City FORT WORTH	State TX Zip Code 76155	
Purpose of Disbursement TRAVEL		Memo Item <input checked="" type="checkbox"/>
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

731.59

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
AX PAC

Full Name (Last, First, Middle Initial) A. RIVER VALLEY BANK CARDMEMBER SERVICES		Date of Disbursement MM / DD / YYYY 04 / 23 / 2018
Mailing Address P.O. BOX 790408		FEC Identification Number C [REDACTED] Transaction ID : SB21B.I9839 Amount of Each Disbursement this Period [REDACTED] 22764.56
City ST. LOUIS	State MO	Zip Code 63179-1864
Purpose of Disbursement CREDIT CARD PAYMENT		Category/ Type [REDACTED]
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) B. AMERICAN AIRLINES		Date of Disbursement MM / DD / YYYY 04 / 23 / 2018
Mailing Address 4333 AMON CARTER BLVD		FEC Identification Number C [REDACTED] Transaction ID : SB21B.I9859 Amount of Each Disbursement this Period [REDACTED] 481.86
City FORT WORTH	State TX	Zip Code 76155
Purpose of Disbursement TRAVEL		Category/ Type [REDACTED]
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input checked="" type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) C. CAPITOL HILL CLUB		Date of Disbursement MM / DD / YYYY 04 / 23 / 2018
Mailing Address 300 FIRST STRET SE		FEC Identification Number C [REDACTED] Transaction ID : SB21B.I9845 Amount of Each Disbursement this Period [REDACTED] 402.99
City WASHINGTON	State DC	Zip Code 20003
Purpose of Disbursement FOOD/BEVERAGE		Category/ Type [REDACTED]
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input checked="" type="checkbox"/> Memo Item	

SUBTOTAL of Disbursements This Page (optional).....▶	[REDACTED] 22764.56
TOTAL This Period (last page this line number only).....▶	[REDACTED]

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
AX PAC

Full Name (Last, First, Middle Initial) A. CAREY		Date of Disbursement MM / DD / YYYY 04 / 23 / 2018
Mailing Address 4530 WISCONSIN AVE NW		FEC Identification Number C Transaction ID : SB21B.I9861 Amount of Each Disbursement this Period 224.25
City WASHINGTON	State DC	
Purpose of Disbursement TRAVEL		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input checked="" type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) B. CARMINE'S		Date of Disbursement MM / DD / YYYY 04 / 23 / 2018
Mailing Address 425 7TH ST NW		FEC Identification Number C Transaction ID : SB21B.I9842 Amount of Each Disbursement this Period 991.38
City WASHINGTON	State DC	
Purpose of Disbursement CATERING/FACILITY RENTAL		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input checked="" type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) C. CITY CAB OF ORLANDO		Date of Disbursement MM / DD / YYYY 04 / 23 / 2018
Mailing Address 324 W GORE STREET		FEC Identification Number C Transaction ID : SB21B.I9871 Amount of Each Disbursement this Period 309.32
City ORLANDO	State FL	
Purpose of Disbursement TRAVEL		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input checked="" type="checkbox"/> Memo Item
State: District:		

SUBTOTAL of Disbursements This Page (optional).....▶	0.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
AX PAC

Full Name (Last, First, Middle Initial) A. DELTA AIRLINES		Date of Disbursement MM / DD / YYYY 04 / 23 / 2018
Mailing Address 1030 DELTA BLVD		FEC Identification Number C [] Transaction ID : SB21B.I9857 Amount of Each Disbursement this Period [] 1521.80
City ATLANTA	State GA	Zip Code 30354-7561
Purpose of Disbursement TRAVEL		Category/ Type []
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: []	District: []	<input checked="" type="checkbox"/> Memo Item

Full Name (Last, First, Middle Initial) B. DISNEY RESORT		Date of Disbursement MM / DD / YYYY 04 / 23 / 2018
Mailing Address P.O. BOX 10000		FEC Identification Number C [] Transaction ID : SB21B.I9858 Amount of Each Disbursement this Period [] 13558.45
City LAKE BUENA VISTA	State CA	Zip Code 32830
Purpose of Disbursement TRAVEL		Category/ Type []
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: []	District: []	<input checked="" type="checkbox"/> Memo Item

Full Name (Last, First, Middle Initial) C. FRONTERA COCINA		Date of Disbursement MM / DD / YYYY 04 / 23 / 2018
Mailing Address 1604 BUENA VISAT DR.		FEC Identification Number C [] Transaction ID : SB21B.I9848 Amount of Each Disbursement this Period [] 205.43
City LAKE BUENA VISTA	State FL	Zip Code 32830
Purpose of Disbursement FOOD/BEVERAGE		Category/ Type []
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: []	District: []	<input checked="" type="checkbox"/> Memo Item

SUBTOTAL of Disbursements This Page (optional).....▶	[] 0.00
TOTAL This Period (last page this line number only).....▶	[]

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
AX PAC

A. HOLDEN CUSTOM PRODUCTS

Full Name (Last, First, Middle Initial)

Date of Disbursement

Mailing Address 7920 BELT LINE
SUITE 960

M M M	/	D D D	/	Y Y Y Y Y
04		23		2018

City DALLAS State TX Zip Code 75254-8640

FEC Identification Number

Purpose of Disbursement
PRINTING

C

Transaction ID : **SB21B.I9853**
Amount of Each Disbursement this Period

Candidate Name

Category/
Type

825.75

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Memo Item

B. JOE'S STONE CRAB

Full Name (Last, First, Middle Initial)

Date of Disbursement

Mailing Address 750 15TH ST NW

M M M	/	D D D	/	Y Y Y Y Y
04		23		2018

City WASHINGTON State DC Zip Code 20005

FEC Identification Number

Purpose of Disbursement
CATERING/FACILITY RENTAL

C

Transaction ID : **SB21B.I9843**
Amount of Each Disbursement this Period

Candidate Name

Category/
Type

2219.98

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Memo Item

C. PIN DEPOT

Full Name (Last, First, Middle Initial)

Date of Disbursement

Mailing Address 2200 WINTER SPRINGS BLVD
SUITE 106-322

M M M	/	D D D	/	Y Y Y Y Y
04		23		2018

City OVIEDO State FL Zip Code 32765

FEC Identification Number

Purpose of Disbursement
PRINTING

C

Transaction ID : **SB21B.I9854**
Amount of Each Disbursement this Period

Candidate Name

Category/
Type

468.00

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

0.00

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**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
AX PAC

Full Name (Last, First, Middle Initial) A. SANCTUARY HOTEL		Date of Disbursement MM / DD / YYYY 04 / 23 / 2018	
Mailing Address 132 W 47TH STREET			
City NEW YORK	State NY	Zip Code 10036	
Purpose of Disbursement TRAVEL		FEC Identification Number C	
Candidate Name		Transaction ID : SB21B.I9864 Amount of Each Disbursement this Period 256.31	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	<input checked="" type="checkbox"/> Memo Item		

Full Name (Last, First, Middle Initial) B. VERIZON		Date of Disbursement MM / DD / YYYY 04 / 23 / 2018	
Mailing Address P.O. BOX 25505			
City LEHIGH VALLEY	State PA	Zip Code 18002	
Purpose of Disbursement PHONE SERVICE		FEC Identification Number C	
Candidate Name		Transaction ID : SB21B.I9852 Amount of Each Disbursement this Period 257.56	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	<input checked="" type="checkbox"/> Memo Item		

Full Name (Last, First, Middle Initial) C.		Date of Disbursement MM / DD / YYYY	
Mailing Address			
City	State	Zip Code	
Purpose of Disbursement		FEC Identification Number C	
Candidate Name		Amount of Each Disbursement this Period	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	<input type="checkbox"/> Memo Item		

SUBTOTAL of Disbursements This Page (optional)..... ▶

0.00

TOTAL This Period (last page this line number only)..... ▶

23496.15